

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>BA</i>	<i>10385</i>	
O.I.P.E. CLASSIFIER	<i>PH</i>		<i>7/22</i>
FORMALITY REVIEW		<i>10017</i>	<i>8/3/00</i>
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	<i>1/22/03</i>
2	<i>1/22/03</i>
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Claim	Date
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If more than 150 claims or 10 actions  
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